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04/06/2005

**BLAKELY SOKOLOFF TAYLOR & ZAFMAN****12400 WILSHIRE BOULEVARD****SEVENTH FLOOR****LOS ANGELES, CA 90025-1030**

07/06/2005 SHINASS2 00000031 10731357

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<u>Linda Delia</u>	(Depositor's name)
<u>[Signature]</u>	(Signature)
<u>7-1-05</u>	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/731,357	12/08/2003	Sang-Hyun Oh	51876P413	4364

TITLE OF INVENTION: METHOD FOR MANUFACTURING FERROELECTRIC RANDOM ACCESS MEMORY CAPACITOR

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	07/06/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
THOMAS, TONIAE M	2822	438-240000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

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2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 BLAKELY SOKOLOFF2 TAYLOR & ZAFMAN

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## 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

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(B) RESIDENCE: (CITY and STATE OR COUNTRY)

**HYNIX SEMICONDUCTOR INC.****REPUBLIC OF KOREA**Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

☒ Issue Fee☒ Publication Fee (No small entity discount permitted)☒ Advance Order - # of Copies ten (10)

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☒ A check in the amount of the fee(s) is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 02-2666 (enclose an extra copy of this form).

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☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Typed or printed name Eric S. HymanRegistration No. 30,139

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